

Inmate Grievance Form

(IGF-3)

Harrison County Adult Detention Center

Second Step Response Form

APPROVED MAR 12 2007
Grievance Number 02 - 048 - 07

Type or use ball-point pen. You must return your response to the Grievance Officer within 10 days of the date the request was initiated.

To: Serome Johnson 287256
Inmate Name and Docket Number

B/A

Housing Unit

From: Donald A. Cabana
Warden

HCADC/HCWC
Location-Circle One

When a criminal charge is filed against an inmate it is turned over to the C.I.D. division. You will need to contact them for further classification

03-06-07

Date

Warden's Signature

Warden's Signature

This is the final step in the Inmate Grievance process.

Instructions to Warden: Send original and Step 2 copy to the Grievance Officer.

Instruction to Inmate: This ori

Inmate's Original

